

\* PAPERWORK REDUCTION ACT STATEMENT: Public reporting burden for this collection of information is estimated to average 1 hour per response, including time required for searching existing data sources, gathering the necessary data, providing the information required, and reviewing the final collection. Send comments on the accuracy of this estimate of the burden and recommendations for reducing it to: Department of State (A/RPS/DIR) Washington, D.C. 20520.

**U.S. DEPARTMENT OF STATE**  
**DIRECTORATE OF DEFENSE TRADE CONTROLS**  
**REQUEST FOR ADVISORY OPINION**

\*Transaction Number:

Please note that an Asterisk (\*) next to a field or block in a document designates a mandatory field or block.

**No classified information can be included in this request. Classified information must be sent separately to DDTC in accordance with the Defense Security Service guidelines.**

Classified information is being sent under separate cover ☐

**To open a document, click on a document to highlight it and select the "Open Document" button. The document that you selected will open.**

## Required Documents

DS-6001

[Open Document](#)

## Optional Documents

126.13 Eligibility Letter  
Other Amplifying Documents  
Transaction Exception Request[Open Document](#)

## Included Documents

[Open Document](#)

DATE RECEIVED: 02/15/2005

CASE NO. 

## UNITED STATES OF AMERICA DEPARTMENT OF STATE

## REQUEST FOR ADVISORY OPINION

<b>* 1. Date Prepared</b> <input type="text" value="02/15/2005"/>		<b>2. DDTC Applicant/Registrant Code</b> <input type="text"/>	
<b>3. Applicant Name, Address, ZIP Code and Tel. No.</b> <input type="checkbox"/> Subsidiary *Name <input style="width: 100%;" type="text"/> *Attention <input style="width: 100%;" type="text"/> *Address <input style="width: 100%;" type="text"/> *City <input style="width: 100%;" type="text"/> * State <input style="width: 20%;" type="text" value="State"/> *ZIP Code <input style="width: 20%;" type="text"/> *Telephone # <input style="width: 30%;" type="text"/> Ext. <input style="width: 10%;" type="text"/>		<b>4. Names, agency and telephone numbers of U.S. Government personnel (not DDTC) familiar with the request</b> Name <input style="width: 100%;" type="text"/> Agency <input style="width: 30%;" type="text" value="Agency"/> <input style="width: 70%;" type="text"/> Please Specify <input style="width: 100%;" type="text"/> Telephone # <input style="width: 40%;" type="text"/> Ext <input style="width: 10%;" type="text"/> <input type="button" value="Add More Government Contacts"/>	
<b>*6. Country(s) of Ultimate Destination</b> <div style="display: flex; align-items: center; margin-top: 10px;"> <input style="width: 40%;" type="text" value="Country"/> <input style="width: 20px; height: 20px; margin: 0 5px;" type="button" value="&lt;=="/> <div style="border: 1px solid black; width: 150px; height: 60px; margin: 0 5px;"></div> <div style="border: 1px solid black; padding: 2px; text-align: center; width: 40px;">View Full List</div> </div>		<b>5. Name and telephone number of applicant contact(s)</b> Name <input style="width: 100%;" type="text"/> Telephone # <input style="width: 40%;" type="text"/> Ext <input style="width: 10%;" type="text"/> <input type="button" value="Add More Contacts"/>	
<b>*8. Name and address of foreign end-user(s)</b> Name <input style="width: 100%;" type="text"/> Address <input style="width: 100%;" type="text"/> City <input style="width: 100%;" type="text"/> Country <input style="width: 30%;" type="text" value="Country"/> <input type="button" value="Add More Foreign End-Users"/>		<b>*7. Name, address, role of foreign intermediate(s) and nationality if not of country identified</b> <input type="checkbox"/> None This foreign intermediate is a <input style="width: 100%;" type="text" value="Foreign Intermediate Identity"/> Name <input style="width: 100%;" type="text"/> Address <input style="width: 100%;" type="text"/> City <input style="width: 100%;" type="text"/> Country <input style="width: 30%;" type="text" value="Country"/> Role <input style="width: 100%;" type="text"/> Nationality of foreign intermediate <input style="width: 30%;" type="text" value="Country"/> <input type="button" value="Add More Foreign Intermediates"/>	

Line Item #	*9. Defense Article type	*10. Quantity	*11. Commodity	*12. USML Cat. Number
1	Defense Article Type			*Category <input style="width: 40%;" type="text"/> *Sub <input style="width: 40%;" type="text"/>
	*13. Envisioned transaction type	Unit Type		Commodity Code <input style="width: 100%;" type="text"/>
	<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;">Transaction Type</div> If Temporary Import or In Transit, being shipped from <div style="border: 1px solid black; padding: 2px; margin-top: 5px;">Country</div>			<b>14. \$ Value</b> Unit Price <input style="width: 30%;" type="text"/> *Line Item Total <input style="width: 30%;" type="text"/> <div style="border: 1px solid black; padding: 2px; text-align: center; margin-top: 5px;">Calculate</div>
<input type="button" value="Add More Items"/> <input type="checkbox"/>			<b>* 15. TOTAL VALUE (Sum of All Pages) \$</b> <input style="width: 100%;" type="text" value="0"/>	

\*16. Identify highest government security classification of the commodity that is the subject of this request (NOTE: Do not include classified information)

a. The highest level of U.S. Government Security Classification is

Classification

b. If a commodity is produced in a foreign country, is it government classified?

Yes

No

If yes, provide details in Block 18.

\*17. Specific Purpose/End Use of Defense Article(s)

☐ Request for Prior Approval (22 CFR 126.8)

View Full Description

18. Additional Details of Transaction

View Full Description

**\* 19. Applicant's statement (see instructions)**

I, , an empowered official (ITAR 120.25) or an official of a foreign government entity in the U.S., hereby request an advisory opinion on the transaction above; warrant the truth of all statements made herein; and acknowledge, understand and will comply with the provisions of Title 22 CFR 120-130, and any conditions and limitations imposed.

I am authorized by the applicant to certify the following in compliance with 22 CFR 126.13:

- (1) Neither the applicant, its chief executive officer, president, vice presidents, other senior officers or officials (e.g., comptroller, treasurer, general counsel) nor any member of its board of directors is:
  - (a) the subject of an indictment for or has been convicted of violating any of the U.S. criminal statutes enumerated in 22 CFR120.27 since the effective date of the Arms Export Control Act, Public Law 94-329, 90 Stat. 729 (June 30, 1976); or
  - (b) ineligible to contract with, or to receive a license or other approval to import defense articles or defense services from, or to receive an export license or other approval from any agency of the U.S. Government;
- (2) To the best of the applicant's knowledge, no party to the export as defined in Section 126.7 (e) has been convicted of violating any of the U.S. criminal statutes enumerated in 22 CFR 120.27 since the effective date of the Arms Export Control Act, Public Law 94-329, 90 Stat. 729 (June 30, 1976), or is ineligible to contract with, or to receive a license or other approval to import defense articles or defense services from, or to receive an export license or other approval from any agency of the U.S. Government; and

**22 CFR 126.13 Certification Mandatory for 22 CFR 126.8 (Select one)**

- ☐ I am authorized by the applicant to certify that the applicant and all the parties to the transaction can meet in full the conditions of 22 CFR 126.13 as listed above.
- ☐ I am authorized by the applicant to certify to 22 CFR 126.13. The applicant or one of the parties of the transaction cannot meet one or more of the conditions of 22 CFR 126.13 as listed above. A request for an exception to policy is attached.
- ☐ I am not authorized by the applicant to certify the conditions of 22 CFR 126.13 as listed above. The applicant and all the parties to the transaction can meet in full the conditions of 22 CFR 126.13 as listed above. Please see the attached letter for such certification.
- ☐ I am not authorized by the applicant to certify the conditions of 22 CFR 126.13 as listed above. The applicant or one of the parties of the transaction cannot meet one or more of the conditions of 22 CFR 126.13 as listed above. A letter of such certification and request for an exception to policy is attached.

Signature

Signature

**20. Response to be sent to (Enter name, address and tel. no.)**

*[Block is inactive on electronic form]*

☐ Same as Block 3    ☐ Hold for Pickup

Name

Attention

Address

City

State  Zipcode

Country

Telephone #  Ext.

**Subsidiary Information under Block 3, Page one of DS-6001**

Name	<div></div>		
Attention	<div></div>		
Address	<div></div>		
City	<div></div>		
State	<div>State</div>	Zipcode	<div></div>
Telephone #	<div></div>	Ext.	<div></div>